

PETITION FOR EXCEPTION TO POLICY (PEP) FOR GRADUATE STUDENT APPOINTMENT

- Use this petition for appointment into a graduate student title of individuals who do not meet eligibility guidelines.
- Petition must be submitted at least **two weeks prior** to the begin date of the appointment, including supporting documentation.
- Hiring may not take place until the exception has been approved.
- Forms submitted without proper signatures will be returned.
- Additional comments and supplemental materials may be attached to this form.

Student Name: _____ UC Davis Student ID #: _____ E-mail: _____

Hiring Dept.: _____ Graduate Program: _____

REASON EXCEPTION IS BEING REQUESTED

- Appointment of a professional degree (J.D., M.D., D.V.M., M.B.A.) student to a graduate student teaching or research title outside their degree program.
- Appointment of a self-supporting degree program student to a teaching title in a state-funded program.
- Appointment of a graduate student from another UC campus to a teaching or research title.
- Appointment of a graduate student with a low GPA or on Academic Probation for non-GPA reason.
- Other: _____

Comments: Attach additional paperwork or letters of justification to this petition.

CURRENT STATUS

- Master's Student Graduate Student in a Self-Supporting Degree Program Doctoral Student
- Other – check one: Professional Degree Student Undergraduate Student Other UC (non-Davis) Student Non-Student
- Student passed the Qualifying Examination and/or Advanced to Candidacy. Exam/Candidacy Date: _____

Student's current status (check one): Regular registered status Registered *in absentia* PELP status Filing Fee status

Current GPA: _____ Number of units enrolled during proposed quarter: _____

APPOINTMENT REQUIRING EXCEPTION TO POLICY

Title: _____ Appt %: _____ Begin Date: _____ End Date: _____

ATTENTION AUTHORIZED HIRING DEPARTMENT: Prior to submitting this PEP, the position you are trying to fill must have been listed and no other qualified candidate identified. The hiring department is responsible for ensuring that the information submitted on this form is true and correct.

Hiring Dept. Chair Signature: _____ Date: _____

Student's Graduate Adviser Signature: _____ Date: _____

Student's Graduate Adviser Printed Name: _____

Hiring Department Staff Contact, E-mail, Address/Phone: _____

GRADUATE STUDIES SECTION

Student is currently on *in absentia* or Filing Fee status: Begin term: _____ End term: _____ **HIRING DEPT. NOTIFIED (date):** _____

- Approved Denied

Associate Dean for Graduate Students Signature: _____ Date: _____

Comments: _____